

The University of Winnipeg Collegiate
FIELD TRIP PROPOSAL

This Field Trip is used to plan educational field trips inside Canada. It is to be completed by the teacher in charge, and reviewed and approved by the Dean. Proposal Forms must be submitted for approval in advance of the departure date.

For field trips outside of Manitoba, students must be covered by extended health coverage along with travel health insurance. The University of Winnipeg/The University of Winnipeg Collegiate does not assume any financial responsibility in the event that students are stranded or delayed due to events and circumstances beyond the control of the institution. The University of Winnipeg/The University of Winnipeg Collegiate also does not assume any financial responsibility in the event that a field trip is postponed or cancelled.

A detailed itinerary must be provided before approval, and be attached to this form.

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| TEACHER IN CHARGE: _____ Contact name and phone on location: _____ Contact name and phone, home base: _____ PHONE: _____ |
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| DESTINATION: _____ DATES OF TRIP: _____ Departure Time: _____ Return Time: _____ GRADE LEVEL: _____ # OF STUDENTS: _____ # OF MALE: _____ # OF FEMALE: _____ Area of study: _____ Purpose of trip: _____ Educational value (goals and/or student learning outcomes): _____ _____ _____ Name of Service Provider (SP), if applicable: _____ SP contact person: _____ SP phone: _____ |
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| COSTS Estimated total cost of trip per parent/student: School \$ _____ Student \$ _____ Transportation cost per student, if applicable: School \$ _____ Student \$ _____ Lodging cost per student, if applicable: School \$ _____ Student \$ _____ Program cost per student, if applicable: School \$ _____ Student \$ _____ Student insurance: ___ yes ___ no Accommodation for overnight stay (billeting, school, hotel, other): _____ |
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SAFETY AND EMERGENCY PLAN

I have reviewed and applied relevant University/School policies and procedures: yes: ____ no: ____

Attach a brief description of the risk and assessment and safety planning process to address any key risks related to the site/area, weather, activity, and/or group.

Contingency plan: Behaviour, weather, etc. _____

Attach a brief description of the supervision processes to be used (large or small group setting/s; lead/sweep; head counts; buddy system; level of supervision – constant visual, on-site, in the area; other elements of supervision plan as relevant).

First aid kit(s) carried, stocked and accessible: yes: ____ no: ____
 Emergency communications equipment carried and/or accessible (check all that apply):
 ___ telephone ___ cell phone ___Service Provider responsibility ___ none ___other (specify)

Describe communication plan to be used in case of emergency: _____

SUPERVISORS:

| Responsibility | Name | Gender: M/F |
|-------------------|------|-------------|
| Teacher-in-charge | | |
| Teacher-in-charge | | |
| Other supervisor | | |
| Other supervisor | | |
| Other supervisor | | |
| Other supervisor | | |

Total number of supervisors: _____

CHECKLIST (check all that apply):

- ___ Detailed trip planner Form
- ___ Parent/Guardian Correspondence
- ___ Parental Consent and Acknowledgement of Risk Form
- ___ Field Trip Emergency Medical Information Form

